FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

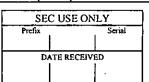
OMB APPROVAL

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Estimated average burden

hours per response......16.00



POTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering(check if this is an amendment and name has changed, and indicate change.) Series D Preferred Stock Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	11555 11864 11864 11864 11864 11864 11864 11864 11864 11864 11864 11864 11864 1
1. Enter the information requested about the issuer	01001302
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) nLight Photonics Corporation	
	ne Number (Including Area Code) 66-4460
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	ne Number (Including Area Code)
Brief Description of Business Development of high performance optical components	
Type of Business Organization Corporation	
Actual or Estimated Date of Incorporation or Organization: Month Year	JUN 1 8 2007 D THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 12

		A. BASIC IDE	NTIFICATION DATA							
2. Enter the information re	equested for the fo	ollowing:								
Each promoter of to	he issuer, if the iss	suer has been organized w	vithin the past five years;							
 Each beneficial owr 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.									
Each executive offi	cer and director o	corporate issuers and of	corporate general and man	aging partners of	partne	rship issuers; and				
 Each general and r 	nanaging partner	of partnership issuers.								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner				
Full Name (Last name first, if Carano, Bandel	individual)									
Business or Residence Addre 5408 NE 88th Street, Bui			ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director		General and/or Managing Partner				
Full Name (Last name first, Carlisle, Doug	if individual)									
Business or Residence Addre 5408 NE 88th Street, Bui			ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director		General and/or Managing Partner				
Full Name (Last name first, Ericson, Bill	if individual)		-							
Business or Residence Address NE 88th Street, Bui			ode)			" .				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner				
Full Name (Last name first, Grant, Jeff	if individual)			·						
Business or Residence Address NE 88th Street, Bui			ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner				
Full Name (Last name first, Keeney, Scott H.	if individual)									
Business or Residence Address NE 88th Street, Bui			ode) .							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner				
Full Name (Last name first, Osborne, David D.	if individual)									
Business or Residence Address NE 88th Street, Bui			ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner				
Full Name (Last name first, Strahan, Randy	if individual)									
Business or Residence Address 5408 NE 88th Street, Bui			ode)							

		A. BASIC IDE	NTIFICATION DATA	•		
2. Enter the information re	equested for the f	ollowing:				
 Each promoter of t 	he issuer, if the is	suer has been organized w	ithin the past five years;			
 Each beneficial own 	ner having the pow	er to vote or dispose, or dire	ect the vote or disposition of	f, 10% or more of	a class	of equity securities of the issuer.
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and man	aging partners of	partne	rship issuers; and
 Each general and r 	managing partner	of partnership issuers.				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if Bell, Jake	individual)					
Business or Residence Address NE 88th Street, Bui			de)			<u></u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, DeVito, Mark A.	if individual)				····	, , , , , , , , , , , , , , , , , , , ,
Business or Residence Address NE 88th Street, Bui	`		de)	,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Farmer, Jason	if individual)			· ·		
Business or Residence Address NE 88th Street, Bui			de)	,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Huang, Zack	if individual)					
Business or Residence Address NE 88th Street, Bui			de)		·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Martinsen, Robert J.	if individual)					
Business or Residence Address NE 88th Street, Bui			de)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Norgaard, Steve	if individual)					
Business or Residence Address NE 88th Street, Bui	•		de)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Mohr, Davidow Ventures						
Business or Residence Address 3000 Sand Hill Road, Bu					-	•

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
 Each promoter of the issuer, if the issuer has been organized within the past five years; 									
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.									
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Oak Investment Partners X, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code) 525 University Avenue, Suite 1300, Palo Alto, CA 94301									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Menlo Ventures IX, LP									
Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Road, Building 3, Suite 290, Menlo Park, CA 94025									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) nLight Holdings, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code) 11805 N. Creek Parkway S., Suite 113, Bothell, WA 98011									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Schultheis, Patrick J.									
Business or Residence Address (Number and Street, City, State, Zip Code) 701 Fifth Avenue, Suite 5100, Seattle WA 98104									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Schaezler, David									
Business or Residence Address (Number and Street, City, State, Zip Code) 5408 NE 88th Street, Building E, Vancouver, WA 98665									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									

:		· · · · ·			B. 1N	FORMAT	ION ABOU	T OFFER	ING				·
									Yes	No			
ì.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										\boxtimes		
	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?								- 0 00				
2.	What is	the minimu	ım investme	nt that will	be accepte	d from any	individual?	·····			***************************************	\$ 0.00 Yes	No
3.	Does th	e offering p	ermit joint (ownership o	of a single u	ınit?				***************		. 🛛	
4.	Enter th	he informat	ion requeste	ed for each	person wh	no has been	or will be	paid or give	en, directl	y or indirec	tly, any		
			ilar remunei ted is an ass										
	If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
£11		- '	you may set irst, if indivi		ntormation	ior that broi	ker or deale	r oniy.	-				
	<u> </u>							<u> </u>					
Bus	iness or	Residence A	Address (Nu	mber and S	treet, City,	State, Zip C	Code)						
Nan	ne of As	sociated Bro	ker or Deal	er									
Stat	es in Wł	nich Person	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
	(Che	ck "All Stat	es" or check	individual	States)						· · · · · · · ·	🗆 A	All States
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					temp at City	State 7:- (To do)			 .			
Bus	iness or	Residence A	Address (Nu	moer and s	ireei, City,	State, Zip C							
Nar	ne of As	sociated Bro	ker or Deal	er									
Stat	es in Wi	nich Person	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
	(Che	ck "All Stat	es" or check	individual	States)							D #	All States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
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			irst, if indiv									. <u>-</u>	
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
AL AK AZ AR CA CO CT DE DC FL GA									HI	ID			
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	RI	SC	SD	TN	TX	UT	VT	VA	WA	LW M	WI	WY	PKI

	(Use blank sheet, or copy and use additional copies of this sheet, as necessary	essary.)			
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS			
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price	;	Α	smount Already Sold
	Debt\$			\$_	
	Equity\$				
	☐ Common ☐ Preferred		_		
	Convertible Securities (including warrants)			\$_	
	Partnership Interests			\$_	
	Other (Specify)			\$_	
	Total\$				
	Answer also in Appendix, Column 3, if filing under ULOE.			_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number			Aggregate Oollar Amount
		Investors			of Purchases
	Accredited Investors		<u>25</u>	\$	15,227,258
	Non-accredited Investors		_	\$	
	Total (for filings under Rule 504 only)		_	\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security]	Dollar Amount Sold
	Rule 505		_	\$	
	Regulation A		_	\$	
	Rule 504				
	Total		_	\$	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•	_		
	Transfer Agent's Fees		7	S	
	Printing and Engraving Costs			_	
	Legal Fees.		\boxtimes	_	70,000
	Accounting Fees		_	s -	· · · · · · · · · · · · · · · · · · ·
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American LegalNet, Inc. www.USCourtForms.com

70,000

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□ \$____ ⊠ \$___

Engineering Fees.....

Sales Commissions (specify finders' fees separately)

Other Expenses (identify)

Total.....

L	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
	and total expenses furnished in response to Part	e offering price given in response to Part C — Qu t C — Question 4.a. This difference is the "adjust	ted gross	s 15,536,000				
5.	each of the purposes shown. If the amount	oss proceed to the issuer used or proposed to be for any purpose is not known, furnish an estinated of the payments listed must equal the adjust Part C — Question 4.b above.	nate and					
			Payments to Officers, Directors, & Affiliates					
	Salaries and fees		🗆 s	🗆 s				
	Purchase of real estate		s	🗆 s				
	Purchase, rental or leasing and installation of and equipment	f machinery	🔲 s					
	Construction or leasing of plant buildings ar	nd facilities	🗆 s	s				
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	e assets or securities of another	_ \$	□ s				
	Repayment of indebtedness		🗖 s 🚃	_ 🗆 s				
	Other (specify):		s	🗆 s				
				🔲 s				
	Column Totals		ss	<u>0</u> S \$ 15,536,000				
	Total Payments Listed (column totals added)	🖾 s	15,536,000				
Г		D. FEDERAL SIGNATURE		· -				
sig	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange accredited investor pursuant to paragraph (b)	Commission, upon writ					
Īss	uer (Print or Type)	Signature	Date					
nL	ight Photonics Corporation	746	6-4	-07				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Sc	ott H. Veeney	President and Chief Executive Office	r					

 $\mathbb{E}\mathcal{N}\mathcal{D}$

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)